

DISCLOSURE SUMMARY PAGE

Certified

FORM

DR-2

(Rev. 02/96)

DISCLOSURE
REPORT

COMMITTEE NAME (Must be same as on Statement of Organization)

Cohoon for Representative

IA ETHICS AND

PM 7-16-10

2010 JUL 20 PM 12:31

IMPORTANT: Indicate type of committee you are reporting for: ☒ 1

- (1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate
(5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee
(8) Support State of Candidates

For Office Use Only

Comm. #

Indexed

Audited

Computer

376

Mari Hefley

SIGNATURE OF TREASURER (or person filing this report)

319-75249524

TELEPHONE

7/15/2010

DATE SIGNED

Penalties Due For Late Filed Reports Range from \$10 to \$400

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A 7/14/2010

(report date)

REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate one ☒ 1

☐ CHECK IF AMENDMENT TO REPORT DATED

Local Committees, enter Date of Election

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a Notice of Dissolution is filed.)

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)

\$ 9,042.62

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A)

403.18

Schedule C: Fund-raising Events total (Attach Schedule C)

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL\$ 9,445.80

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B)

6,012.07

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)

\$ 3,433.73

UNPAID BILLS (From Schedule D - Attach Schedule D)

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

CONTRIBUTIONS - MONEY TAKEN

(including candidate's personal funds)

**SCHEDULE
A
STATE
CANDIDATE****MONETARY
RECEIPTS****CHECK IF
AMENDING
FORM**

COMMITTEE NAME (Must be same as on Statement of Organization)

Cohoon for Representative

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

caution: Section 68b.32a(6), Iowa Code, prohibits the use of information from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED	PAC ID NUMBER & PAC CHECK number	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE	AMOUNT RECEIVED
6/1/2010	ID# 6058 CK# 4685	Iowa Chiropractic Society PAC 100 East Grand Ave., Suite 240 Des Moines, Iowa 50309		\$ 100.00
6/9/2010	ID# 6101 CK# 3607	Truck PAC Iowa P.O. Box 6121, East Des Moines Str. Des Moines, Iowa 50309		300.00
5/15/2010 thru 7/14/2010	ID# CK#	Casebine Comm. Credit Union 2115 Des Moines Ave Burlington, Iowa 52601		3.18
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL \$				403.18

TOTAL (if last page of this schedule) \$

403.18

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule A)

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEE: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

Cohoon for Representative

**SCHEDULE
B
CANDIDATE**

**MONETARY
EXPENDITURES**

check if amending form ☐

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER AND PAC CHECK #	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
5/17/2010	ID# 376 CK# 5023	House Truman Fund 5661 Fleur Dr Des Moines, Iowa 50321	State Party	\$ 3,000.00
7/10/2010	ID# 376 CK# 5024	House Truman Fund 5661 Fleur Dr Des Moines, Iowa 50321	State Party	\$ 2,000.00
7/10/2010	ID# 376 CK# 5025	Iowa Democratic Party 5661 Fleur Dr Des Moines, Iowa 50321	VAN Voter List	\$ 1,000.00
7/13/2010	ID# 376 CK#	Casebine Comm. Credit Union 2115 Des Moines Ave Burlington, Iowa 52601	checks	\$ 12.07
	ID# 376 CK#			
	ID# 376 CK#			
	ID# 376 CK#			
	ID# 376 CK#			
	ID# 376 CK#			
	ID# 376 CK#			
SUB-TOTAL				\$ 6,012.07
TOTAL (if last page of this schedule)				\$ 6,012.07

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Sch H. (Refer to Sch. H instructions.)

Expenditures to persons/entities providing consulting, advertising, fundraising, polling, managing, organizing services, must also be detail itemised on Schedule G by the amount, purpose, and date of each type A66of expenditure made by the person/entity on behalf of the candiate's committee. (Refer to Schedule G instructions and Iowa Code 56.6(3)(i).)